

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		07-14-01
O.I.P.E. CLASSIFIER		48	7/19/01
FORMALITY REVIEW	<i>Cy</i>	1122	08-24-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	A
2	✓	✓	↑
3	✓	✓	↑
4	✓	✓	↑
5	✓	✓	↑
6	✓	✓	↑
7	✓	✓	↑
8	✓	✓	↑
9	✓	✓	↑
10	✓	✓	↑
11	✓	✓	↑
12	✓	✓	A
13	✓	✓	↑
14	✓	✓	A
15	✓	✓	A
16	✓	✓	A
17	✓	✓	↑
18	✓	✓	↑
19	✓	✓	↑
20	✓	✓	↑
21	✓	✓	↑
22	✓	✓	A
23	✓	✓	↑
24	✓	✓	↑
25	✓	✓	↑
26	✓	✓	↑
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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901
08/24/01